



# UNDERSTANDING HOW PARENTS MAKE DECISIONS ABOUT THEIR CHILDREN'S VACCINATIONS



Emily K. Brunson  
Texas State University

# Methods

## □ Data:

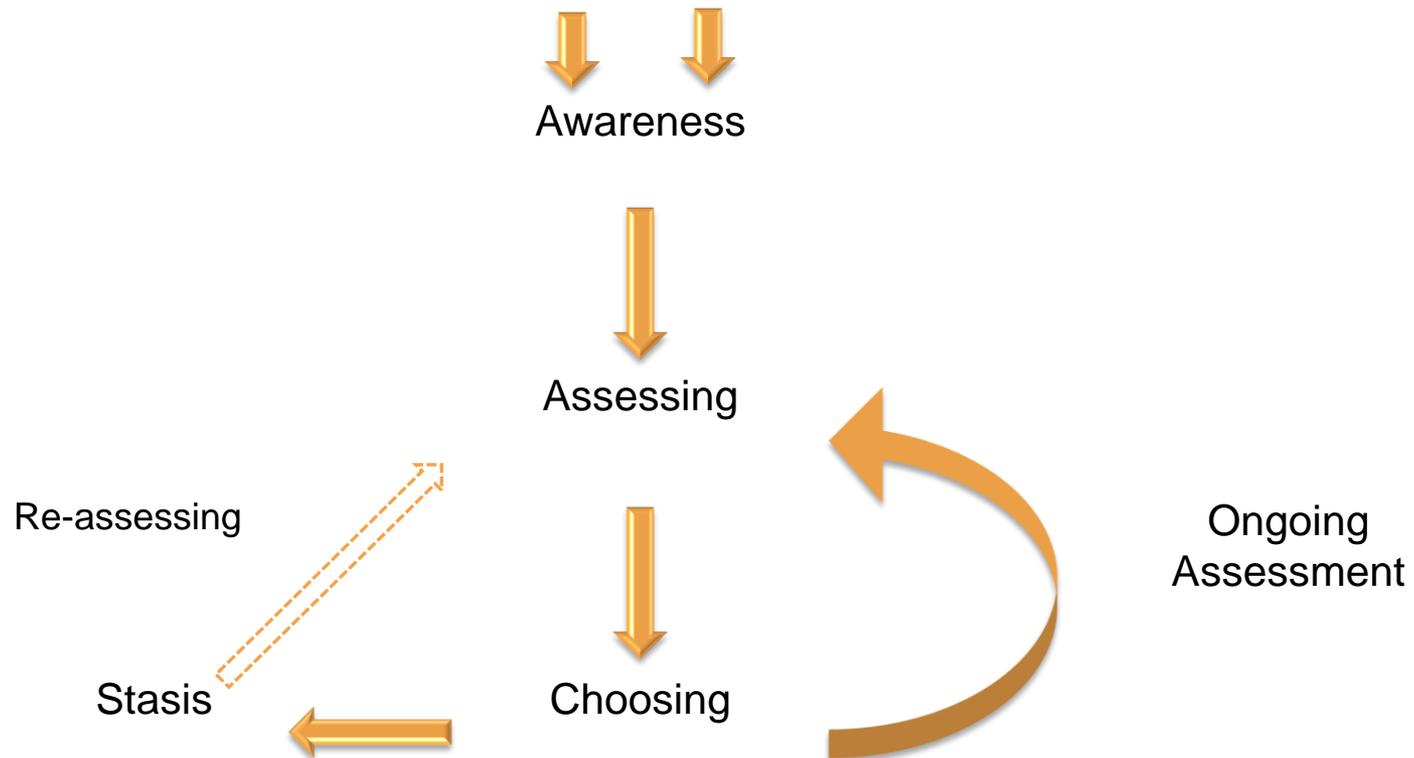
- Formal interviews with 18 sets of parents (15 mothers, 3 couples)
  - US-born parents with children  $\leq 18$  months of age
  - Residents of King County, WA

## □ Analysis:

- Grounded theory
- Results verified with 8 sets of parents (4 participants, 4 non-participants)

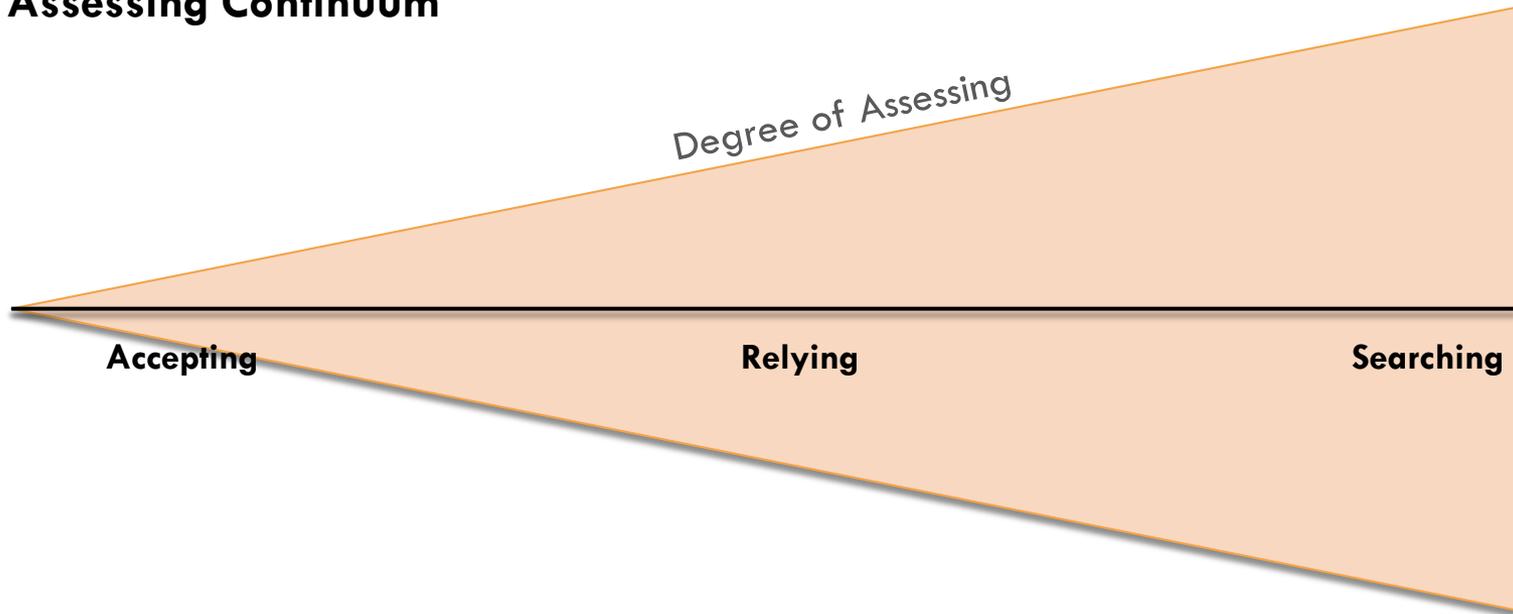
# The decision-making process

## Pre-decision Making Factors



# Assessing

## Assessing Continuum



# Accepting group

- Assessing is minimal
- Primary consideration is the general social norm of vaccination
- Do not investigate vaccination per se, instead assume there is one option:

***It wasn't something that I spent a lot of time thinking about because I just assumed that it was a no brainer . . . . I knew I was going to do it and I knew I had to do it.***

# Example of an acceptor: Keri

- 18 year-old mother, with an 18 month-old son
- Completely vaccinating

***I've always had to get my shots. When you, I think it's when you turn 10 you get shots, when you turn 12 you get shots, so, like I remember always going to go in for shots, seeing my little brothers get their shots. It's just something that . . . I don't know, it just seems like something that's required. Like you've got to feed your baby, that's required.***

# Relying group

- Social norms are still important

***Everyone I know has gotten their kids vaccinated . . . and that's kind of a big influence, you know, just seeing that everyone else is doing this.***

- Assessing primarily focuses on relying on others—  
friends, family members, health care providers, etc.—  
for information and advice
- Not often critical of information or advice received

# Example of a relier: Amy

- 36 year-old mother, 15 month-old daughter
- Not vaccinating at all

***I had two sets of friends all over the country . . . actually 3 now that haven't vaccinated. They all have different political views, they all have different economic backgrounds, they're all different, you know. Some of them are really into naturalist stuff and some of them aren't really. But when it came down to kids . . . they decided not to vaccinate. So I really trusted these people and I listened to what they had to say and it made sense to me.***

# Searching group

- Not concerned about social norms

***Parent 1: People tell us that we're privileged to make this decision, that we shouldn't do it. But I'm like he's our kid so we're going to make the best decision we can for him.***

***Parent 2: Yeah and not because of any society pressure.***

- Research themselves
  - ▣ Rely less on others for advice, insights or information
  - ▣ Focus on published resources
- Consider multiple perspectives and are highly critical of the information they consider

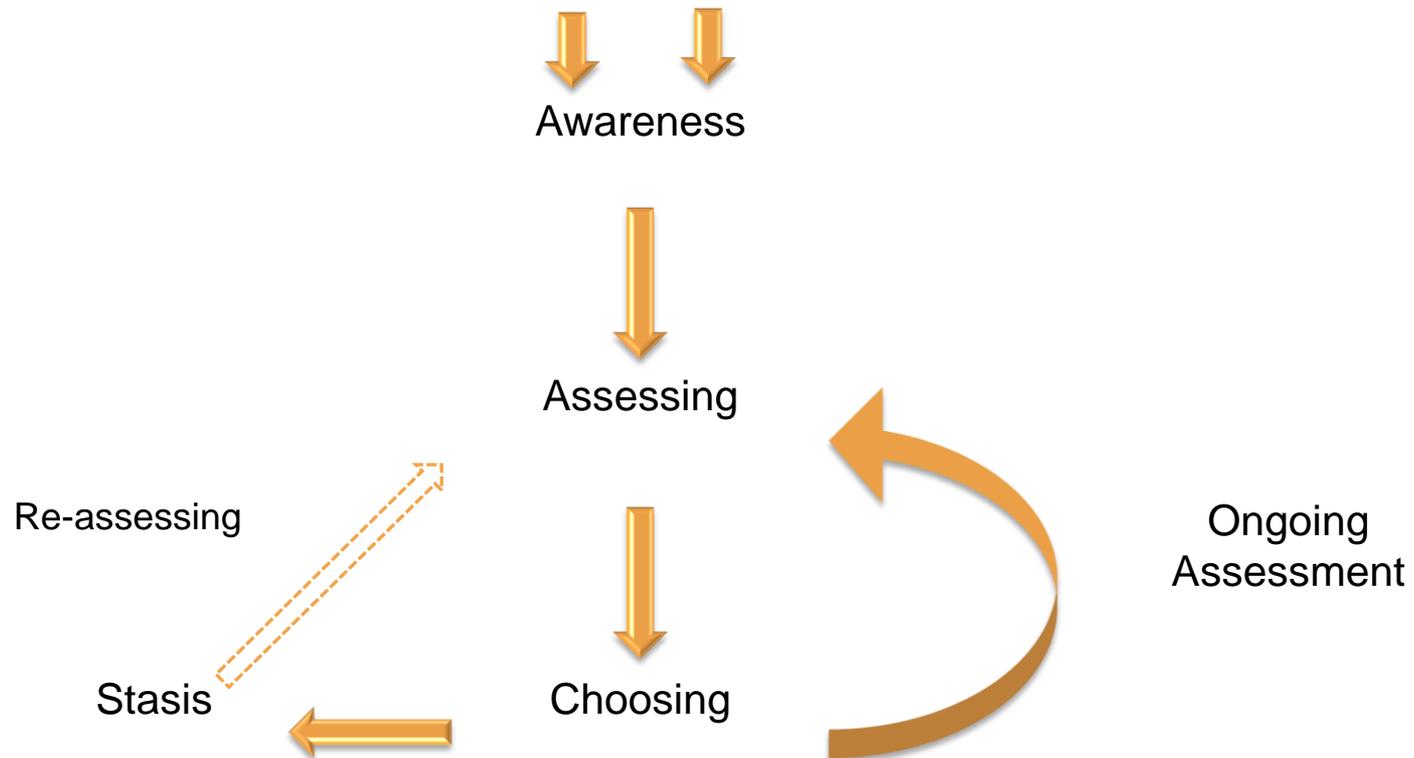
# Example of a searcher: Julie

- 37 year-old mother, with 3 sons, youngest was 10 months old
- Partially vaccinating on a delayed schedule

***I bring in my little piece of paper and say 'OK this is what we're getting today.' And they're like 'OK.' And they go get it and they give it to him.***

# The decision-making process

Pre-decision Making Factors



# Implications

- Suggests that heterogeneity exists in *how* parents make vaccination decisions
  - ▣ Assessing group membership is important
  - ▣ Different interventions will be needed for the different groups
- Common reasons for reassessment should be targeted

# Individual-level assessment

- Ask parents
  - ▣ Have you made a decision about vaccinating your child?
  - ▣ How have you made that decision?
- Any concerns can then be addressed at the appropriate level of assessment

# Community-level assessment

## □ Survey

### ▣ Results for King County

|                            | acceptors | reliers | searchers | total |
|----------------------------|-----------|---------|-----------|-------|
| conformers <sup>1</sup>    | 16        | 108     | 2         | 126   |
| nonconformers <sup>1</sup> | 0         | 62      | 8         | 70    |

## □ Guesstimate based on knowledge of community

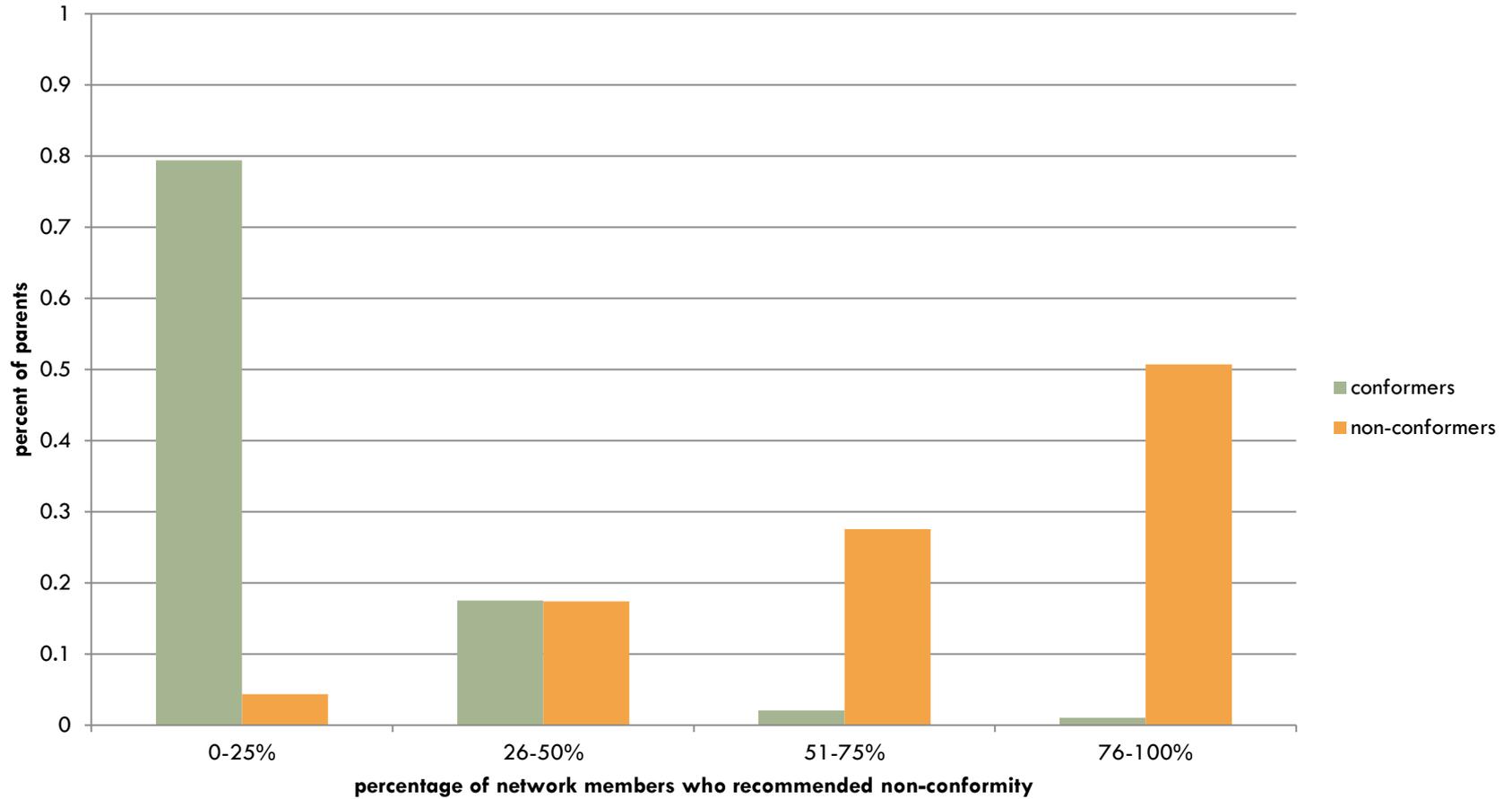
### ▣ Trends

- Younger, less educated, single parents are more likely to be acceptors
- Searchers are more likely to be older, better educated and stay-at-home parents
- Clustering may suggest large presence of reliers

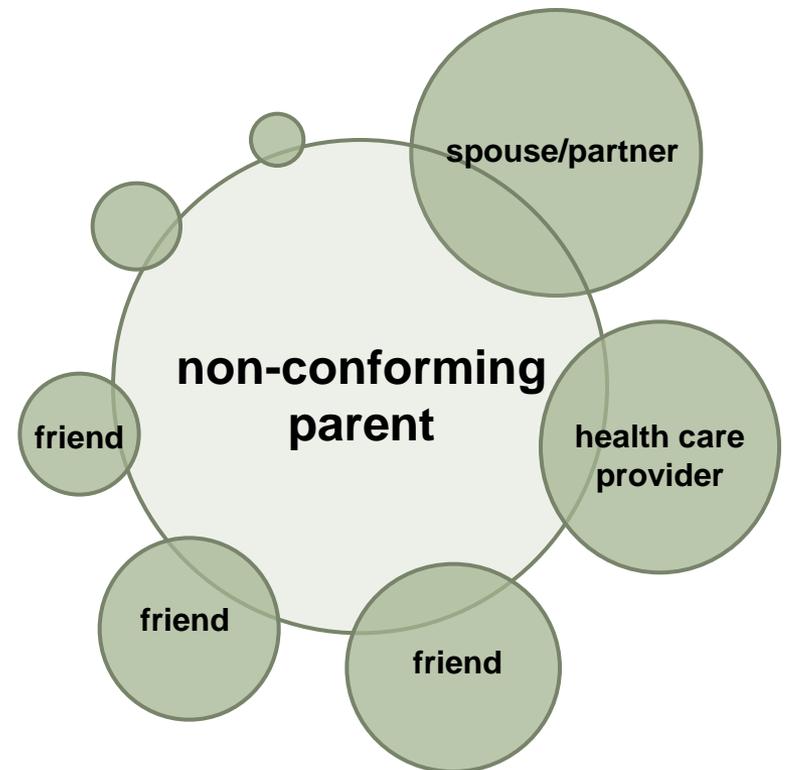
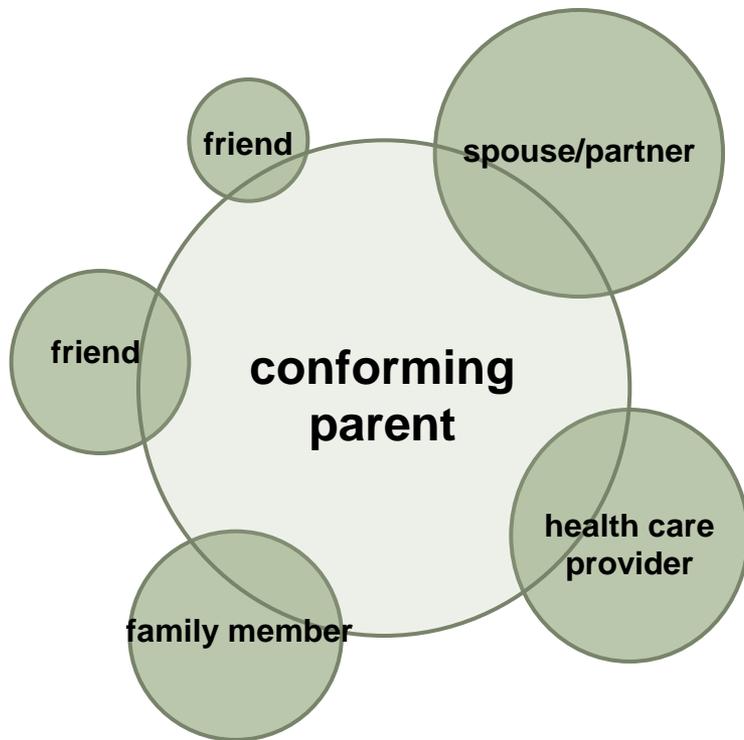
# Tailoring interventions to specific groups

- Acceptors:
  - ▣ Reinforce social norms
  
- Reliers:
  - ▣ Become members of parents' networks
  - ▣ Provide messages that are “sharable”
  - ▣ Encourage supportive parents to discuss vaccination with their networks
  - ▣ Discuss vaccination with your own network

# Influence of others



# People network characteristics



# Tailoring interventions to specific groups

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- Searchers:
  - ▣ Act as resources for parents
  - ▣ Be willing to have colleague-like discussions with parents

# Reasons for reassessment

- Transitioning to vaccinating
  - ▣ School entry
  - ▣ Travel to foreign countries
  - ▣ Health scares (pertussis outbreak, H1N1 outbreak)
  
- Transitioning to not vaccinating
  - ▣ Having children experience bad reactions to vaccines
  - ▣ Concerns about the number or timing of vaccines

# Questions?

